

**Working Conditions:** 

This document is used to provide a basic description of essential duties and other work elements.

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Employee Name:				
Agency:				BU:
vision: Section/District:				
Job Title:			Job (	Code:
Working Title (if different from above):				
Reports To:				
FLSA Status: Non-Exempt (OT Eligible)	☐ Exempt	Effective Date :		
Purpose of Position/Summary:				
Essential Duties/Responsibilities:				
Job Requirements:				
Supervisory Responsibilities/Direct Reports:				
Difficulty of Work:				
Responsibility:				
Personal Work Relationships:				
Physical Effort:				